

Mail To:
Department of Charitable Gaming
101 North 14th Street, 17th Floor
Richmond, VA 23219



FORM 101
ANNUAL FINANCIAL REPORT
FIVE PAGES

REPORT YEAR

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF CHARITABLE GAMING
ANNUAL FINANCIAL REPORT FOR CALENDAR YEAR JANUARY 1st - DECEMBER 31st
DUE DATE: MARCH 15th

ORGANIZATION INFORMATION

If this organization is either a Volunteer Fire Department or Rescue Squad enter **X** in the adjacent box

☐

Organization Name _____ DCG No. _____
Mailing Address _____
City _____ State _____ Zip _____
Business Phone _____ E-Mail _____
Contact Person _____ Daytime Phone _____

PART 1 - RECEIPTS

1.	Bingo Paper Sales Before Discounts	
2.	Electronic Bingo Device Sales Before Discounts	
3.	Bingo Session Instant Bingo, Seal Cards, Pull Tab Sales	
4.	Bingo Session Treasure Chests and Raffle Sales	
5.	Bingo Session Miscellaneous Sales (<i>Daubers, Tape, etc.</i>)	
6.	TOTAL RECEIPTS FOR BINGO SESSIONS (Line 1 thru Line 5)	\$ -
7A.	Discounts Given	
7B.	Winner-Take-All Prizes Paid during 3rd and 4th quarters only	
8.	ADJUSTED RECEIPTS FOR BINGO SESSIONS (Line 6 minus Lines 7A & 7B)	\$ -
9.	Raffle and other Outside Gaming Sales	
10.	GROSS RECEIPTS FOR YEAR (Line 8 plus Line 9)	-

FEE CALCULATION WORKSHEET

11.	a. Audit & Administration Fee (Line 10 X 1.125%)	\$ -	
	b. Late Filing Penalty (\$25 per day after due date)		
	c. Audit & Administration Fees paid with quarterly reports.		
	d. Fee Due with Report		
	Make check payable to: Treasurer of Virginia	(Line 11a+11b-11c)	\$ -

PART 2 - PRIZES

12. a. Bingo Games (Do not include WTA prizes entered on Line 7B)		
b. Bingo Session Instant Bingo, Seal Cards, Pull Tabs		
c. Bingo Session Treasure Chests and Raffles		
d. Door Prizes		
e. Raffles and other Outside Gaming		
f. TOTAL PRIZES AWARDED	(Line 12a thru 12e)	\$ -

PART 3 - EXPENSES

13. Cash Payments from Funds at Bingo Sessions		
14. Cash Shortage or Overage (If this is overage, enter as a negative figure so it will subtract)		
15. Payments to Registered Suppliers (Paper, instants, seal cards, daubers,...)		
16. Rent Paid for Electronic Bingo Devices		
17. Raffle Supplies		
18. Bingo Hall Lease Payments		
19. Payments to Department of Charitable Gaming		
20. All Other Gaming Expenses		
21. a. Use of Proceeds Facility Disbursements		
b. Use of Proceeds Charitable Donations		
c. Use of Proceeds Transfers to Restricted Account		
d. TOTAL USE OF PROCEEDS	UOP % <input type="text"/>	Line 21a thru 21c) \$ -
22. Business Expenses		
23. TOTAL DISBURSEMENTS (Prizes & Expenses)	(Line 12f thru 22)	\$ -

INCLUDE THE FOLLOWING ATTACHMENTS TO THE ANNUAL REPORT:**Use of Proceeds List**

List of individual checks that equal to the amounts listed on Lines 21a, 21b, and 21c. Include check date, check #, \$ amount, payee, & purpose.

Copy of ending bank statement

Copy of December 31st year end bank statements for all gaming accounts, including regular checking, savings, restricted, special funds.

PART 4 - CASH RECONCILIATION

24. Beginning Reconciled Bank Balance - as of January 1st		
25. Beginning Cash on Hand - as of January 1st		
26. Returned Checks Collected (Redeposit of bad checks)		
27. Earned Interest Income		
28. Deposits from Non-Gaming Sources		
29. Total Receipts for Year (Part 1 - Line 10)	\$	-
30. TOTAL FUNDS AVAILABLE (Lines 24 thru 29)	\$	-
31. a. Bank Statement Balance -December 31st		
b. Deposits in Transit		
c. Outstanding Checks		
d. ENDING RECONCILED BANK BALANCE (Lines 31a+31b-31c)	\$	-
32. Ending Cash on Hand		
33. Returned Checks (bad checks from players)		
34. Total Disbursements for Year (Part 3 - Line 23)	\$	-
35. TOTAL FUNDS ACCOUNTED FOR (Lines 31d thru 34)	\$	-

Line 30 must equal Line 35 for this report to be in balance

REPORT IS OUT OF BALANCE BY

\$ -

PART 5 - REQUIRED INFORMATION

If your organization conducts bingo sessions, please complete this section.

36. Winner-Take-All Receipts	
37. Bingo Attendance (Customer Count)	

ACKNOWLEDGEMENT

I, the undersigned, do hereby swear or affirm that the figures and statements on these pages and on the attachments are true, full, and correct to the best of my knowledge and belief.

Signature of President or Designee

Date:

Print Name:

Title:

A report is not considered complete and submitted unless it has been signed and the audit and administration fee has been paid.

REPORT YEAR _____

DCG# _____

ORG NAME _____

Part 6A - SUPPLIES**LIST ALL SUPPLIERS PROVIDING GAMING SUPPLIES, EQUIPMENT, ELECTRONIC BINGO DEVICES**

Supplier Name: _____

Supplier Name: _____

Supplier Name: _____

PART 6B - INVENTORY OF INSTANT BINGO SUPPLIES**INSTANT BINGO SUPPLIES - INSTANT BINGO/SEAL CARDS/COIN BOARDS**

DEALS	DEAL NAME	Form Number	Number of Deals on Hand	Number of Tickets Per Deal	Price Per Ticket	Number of Free Tickets	Cash Payout Per Deal
	(each type of deal should be listed)						
Ending Inventory On Hand As Of December 31st							

PART 6C - INVENTORY OF BINGO PAPER SUPPLIES**BINGO PAPER - SINGLE SHEETS AND PACKS**

PAPER	TYPE OF PAPER	Unit of Issue	ON	UP	Quantity on Hand
Ending Inventory On Hand As Of December 31st					

NOTE: ADDITIONAL PAGES MAY BE ADDED, IF NECESSARY.

REPORT YEAR _____

DCG# _____

ORG NAME _____

PART 7- RESTRICTED ACCOUNT TRANSACTIONS

Name of Bank: _____ Account No. _____

Purpose of Fund: _____

1. Beginning Restricted Bank Account Balance		
Deposits and Other Credits:		
2. Interest income		
3. Deposits from Gaming Account	Must equal the amount from Part 3 - Line 21c	\$ -
4. Other Deposits		
5. Total Credits for Period (Lines 2 + 3 + 4)		\$ -
6. Total Funds Available (Line 1 + Line 5)		\$ -
Checks and Other Debits:		
7. Bank Charges		
8. Checks: Disbursements	Provide Details Below	
9. Other Debits		
10. Total Debits for Period (Lines 7 + 8 + 9)		\$ -
11. Ending Restricted Bank Account Balance (Lines 6 minus Line 10)		\$ -

ITEMIZATION OF CHECKS DISBURSED (Must equal the amount from Line 8 above from Restricted Account)

Date of Check	Check #	Payee	Purpose	Amount of Check
Total				\$ -